24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

| Schedule E) | FOR SE OF FORM 24/48 | | |
|---|---|--|--|
| NAME OF COMMITTEE (In Full) | FEC IDENTIFICATION NUMBER ▼ | | |
| FREEDOMWORKS FOR AMERICA | | | |
| | C C00499020 | | |
| Check if 24-hour report X 48-hour report New report Amends report | ort filed on | | |
| Full Name of Payee | Date of Public Distribution/Dissemination | | |
| Campaign Marketing Strategies | M M / D D / Y Y Y Y Y | | |
| Mailing Address 3240 Wilson Blvd., Ste. 202 | 10 08 2014 | | |
| | Amount | | |
| City State Zip Code | 3953.43 | | |
| Arlington VA 22201 | Transaction ID : SE.47186 Date of Disbursement or Obligation | | |
| Purpose of Expenditure IE-Didier-Autocalls Category/ Type 004 | 10 08 7 2014 | | |
| Name of Federal Candidate Support | Office Sought: X House District: 24 | | |
| CLINT DIDIER Oppose | President Senate State: WA | | |
| Calendar Year-To-Date Per Election for Office Sought 3953.43 | Disbursement For: Primary General 2014 Other (specify) ▶ | | |
| Full Name of Payee Joel Davis | Date of Public Distribution/Dissemination | | |
| | 10 13 2014 | | |
| Mailing Address 200 S. 2nd Ave. | Amount | | |
| City State Zip Code | 2800.00 | | |
| Paden City WV 26159 | Transaction ID : SE.47190 Date of Disbursement or Obligation | | |
| Purpose of Expenditure Category/ Category/ | M M / D D / Y Y Y Y | | |
| IE-Didier-Field Coordinator/Consulting Type 001 | 10 13 2014 | | |
| Name of Federal Candidate Support | Office Sought: House District: 24 | | |
| CLINT DIDIER Oppose | President Senate State: WA | | |
| Calendar Year-To-Date Per Election for Office Sought 6929.39 | Disbursement For: Primary General | | |
| | | | |
| (a) SUBTOTAL of Itemized Independent Expenditures | ▶ 6753.43 | | |
| (b) SUBTOTAL of Unitemized Independent Expenditures | | | |
| (c) TOTAL Independent Expenditures | | | |
| (c) TOTAL Independent Expenditures | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | |
| Matt Kibbe | M M / D D / Y Y Y Y Y | | |
| Signature [Electronically Filed] Date | e 10 14 2014 | | |
| | | | |

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

| Schedule E) | PAGE 2 OF 4 FOR SE OF FORM 24/48 | | | |
|---|---|--|--|--|
| NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA | FEC IDENTIFICATION NUMBER ▼ | | | |
| FREEDOWWORKS FOR AMERICA | C C00499020 | | | |
| Check if 24-hour report X 48-hour report New report Amends report filed on | | | | |
| Full Name of Payee Enterprise | Date of Public Distribution/Dissemination | | | |
| Mailing Address 4202 Air Ram Rd. | 10 13 2014 Amount | | | |
| City | 7in Code | | | |
| City State Charlotte ND | Zip Code 960.32 28214 Transaction ID : SE.47193 Date of Disbursement or Obligation | | | |
| Purpose of Expenditure IE-Didier-Travel | Category/ Type 002 10 13 / 2014 | | | |
| Name of Federal Candidate | Support Office Sought: X House District: 24 | | | |
| CLINT DIDIER | Oppose President Senate State: WA | | | |
| Calendar Year-To-Date Per Election for Office Sought | Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶ | | | |
| Full Name of Payee Freedomworks, Inc. | Date of Public Distribution/Dissemination | | | |
| Mailing Address 400 N Capitol St., NW | | | | |
| Suite 735 | Amount | | | |
| City State Washington DC | Zip Code 1300.84 20001 Transaction ID : SE.47187 | | | |
| Purpose of Expenditure IE-Didier-Email/Social Media/Printing | Category/ Type 004 Date of Disbursement or Obligation 004 10 08 2014 | | | |
| Name of Federal Candidate | Support Office Sought: House District: 04 | | | |
| CLINT DIDIER | Oppose President Senate State: WA | | | |
| Calendar Year-To-Date Per Election for Office Sought | Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶ | | | |
| (a) SUBTOTAL of Itemized Independent Expenditures | | | | |
| (b) SUBTOTAL of Unitemized Independent Expenditures | | | | |
| (c) TOTAL Independent Expenditures | | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | |
| | ctronically Filed] Date 10 14 2014 | | | |
| Signature | | | | |

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

| Schedule E) | PAGE 3 OF 4 FOR SE OF FORM 24/48 | | | |
|---|---|--|--|--|
| NAME OF COMMITTEE (In Full) | FEC IDENTIFICATION NUMBER ▼ | | | |
| FREEDOMWORKS FOR AMERICA | C C00499020 | | | |
| Check if 24-hour report X 48-hour report New report Amends report filed on | | | | |
| Full Name of Payee Freedomworks, Inc. | Date of Public Distribution/Dissemination | | | |
| Mailing Address 400 N Capitol St., NW | 10 09 2014 Amount | | | |
| Suite 735 | | | | |
| City State Zip Code | 175.96 | | | |
| Washington DC 20001 | Transaction ID: SE.47188 Date of Disbursement or Obligation | | | |
| Purpose of Expenditure IE-Didier-Email/Social Media/Printing Category/ Type 004 | 10 09 7 2014 | | | |
| Name of Federal Candidate Support Offi | ce Sought: X House District: 24 | | | |
| CLINT DIDIER Oppose | President Senate State: WA | | | |
| Calendar Year-To-Date Per Election for Office Sought Disl 201 | bursement For: Primary General Other (specify) ▶ | | | |
| Full Name of Payee | Date of Public Distribution/Dissemination | | | |
| Freedomworks, Inc. | 10 13 2014 | | | |
| Mailing Address 400 N Capitol St., NW | | | | |
| Suite 735 | Amount | | | |
| City State Zip Code | 506.35 | | | |
| Washington DC 20001 | Transaction ID : SE.47189 Date of Disbursement or Obligation | | | |
| Purpose of Expenditure IE-Didier-Email/Social Media/Printing Category/ Type 004 | 10 13 / 2014 | | | |
| Name of Federal Candidate Support Offi | ice Sought: House District: 24 | | | |
| CLINT DIDIER Oppose | President Senate State: WA | | | |
| Calendar Year-To-Date Per Election for Office Sought Dis 20' | bursement For: Primary X General Other (specify) ▶ | | | |
| (a) SUBTOTAL of Itemized Independent Expenditures | | | | |
| (2) | 303.01 | | | |
| (b) SUBTOTAL of Unitemized Independent Expenditures | 7 7 | | | |
| (c) TOTAL Independent Expenditures | | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | |
| Matt Kibbe [Electronically Filed] Date | 10 14 2014 | | | |
| Signature | | | | |

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

| Schedule E) | 123 | PAGE 4 OF 4 FOR SE OF FORM 24/48 | | |
|---|--|---|--|--|
| NAME OF COMMITTEE (In Full) | | FEC IDENTIFICATION NUMBER ▼ | | |
| FREEDOMWORKS FOR AMERICA | | C C00499020 | | |
| Check if 24-hour report X 48-hour report New report Amends report filed on | | | | |
| Full Name of Payee Two Talents Enterprises | | of Public Distribution/Dissemination | | |
| Mailing Address 142 Valley Chapel Rd. | Amou | 10 13 2014 unt | | |
| City State Zip C | Codo | 2299.00 | | |
| Walla Walla WA 9936 | 52 Trans | saction ID : SE.47191 of Disbursement or Obligation | | |
| Purpose of Expenditure IE-Didier-Travel | | 10 / 13 / 2014 | | |
| Name of Federal Candidate | Support Office Sough | nt: X House District: 24 | | |
| CLINT DIDIER | Oppose Presid | 10/0 | | |
| Calendar Year-To-Date Per Election for Office Sought 9228 | Disbursemer 2014 | nt For: | | |
| Full Name of Payee United Airlines | | of Public Distribution/Dissemination | | |
| Mailing Address 233 S. Wacker Dr. | | 10 13 2014 | | |
| 200 G. Washer 21. | Amou | unt | | |
| City State Zip C | Code | 687.20 | | |
| Chicago IL 6060 | | action ID : SE.47192 of Disbursement or Obligation | | |
| Purpose of Expenditure IE-Didier-Travel Cate | egory/ Type 002 | 10 13 / 2014 | | |
| Name of Federal Candidate | Support Office Sough | nt: X House District: 24 | | |
| CLINT DIDIER | Oppose Presid | lent Senate State: WA | | |
| Calendar Year-To-Date Per Election for Office Sought | Disbursemen 2014 | nt For: | | |
| • | | | | |
| (a) SUBTOTAL of Itemized Independent Expenditures | ····· | 2986.20 | | |
| (b) SUBTOTAL of Unitemized Independent Expenditures | | | | |
| (c) TOTAL Independent Expenditures | ······································ | 12683.10 | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | |
| Matt Kibbe [Electronically 1 | Filed] Date 10 | 14 2014 | | |
| Signature | | | | |